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## BIB DATA SHEET

CONFIRMATION NO. 8387

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.	
10/821,248	04/08/2004 RULE	607	3766	GUID.618PA (03-553)	
<b>APPLICANTS</b> Eric G. Lovett, Roseville, MN; Mike Favet, San Jose, CA; Adam W. Cates, Minneapolis, MN; Kristine M. Larsen-Kelly, Lino Lakes, MN; Paul Haefner, Circle Pines, MN; Richard S. Sanders, Stillwater, MN;					
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/462,272 04/11/2003					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 06/21/2004					
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <u>/MARK BOCKELMAN/</u> Examiner's signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> MN	<b>SHEETS DRAWINGS</b> 22	<b>TOTAL CLAIMS</b> 95	<b>INDEPENDENT CLAIMS</b> 8
<b>ADDRESS</b> HOLLINGSWORTH & FUNK, LLC 8009 34TH AVE S. SUITE 125 MINNEAPOLIS, MN 55425 UNITED STATES					
<b>TITLE</b> Reconfigurable subcutaneous cardiac device					
<b>FILING FEE RECEIVED</b> 2680	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	